

FEC FORM 2 STATEMENT OF CANDIDACY

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|---|--|---------------------------|---|---|--|
| 1. (a) Name of Candidate (in full) Geoffrey C. Davis | | | 2. Identification Number H2KY04071 | | |
| (b) Address (number and street) PO Box 17192 | | | <input type="checkbox"/> Check if address changed | | |
| (c) City, State and ZIP Code Ft Mitchell KY 41017-1017 | | | 3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A) | | |
| 4. Party Affiliation REPUBLICAN PARTY | | 5. Office Sought House | | 6. State & District of Candidate KY 04 | |

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2012 election(s).
(year of election)

NOTE:This designation should be filed with the appropriate office listed in the instructions.

| | | |
|---|--|--|
| (a) Name of Committee (in full) Geoff Davis for Congress | | |
| (b) Address (number and street) PO Box 17192 | | |
| (c) City, State and ZIP Code Ft Mitchell KY 41017-1017 | | |

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE:This designation should be filed with the principal campaign committee.

| | | |
|---|--|--|
| (a) Name of Committee (in full) NONE | | |
| (b) Address (number and street) | | |
| (c) City, State and ZIP Code | | |

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct, and complete.

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|--|---------------------------|
| Signature of Candidate Geoffrey C. Davis | Date 11/04/2010 |
|--|---------------------------|

NOTE:Submission of false, erroneous or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C.§437g.

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